

## RECEIVED

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July 27, 2006

DIV. OF OIL, GAS & MINING

Fireproof

(C: Incoming

(0070005

Via UPS Next Day

Ms. Pam Grubaugh-Littig
Utah Department of Natural Resources
Division of Oil, Gas and Mining
1594 West North Temple, Suite 1210
Salt Lake City, UT 84114-5801

Re:

Canyon Fuel Company, LLC/Mountain Coal Company, L.L.

Certificates of Liability Insurance

Dear Ms. Grubaugh-Littig:

Enclosed are new Certificates of Liability Insurance for the following:

Canyon Fuel Company, LLC:

Permits: C007005, C007018, C007039

C007034, C041002

Mountain Coal Company, L.L.C.:

Permit:

ACT/007/016

I trust you will find the enclosures to be in order.

Sincerely,

Stacy Carr

Risk Management Department

**Enclosures** 

cc: Rick Parkins, Arch Western Bituminous Group

Chris Hansen, CFC-Skyline Mike Davis, CFC-Sufco Vicky Miller, CFC-Dugout

Henry Barbe, MCC Phil Schmidt, MCC Mary Stahl, MCC

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MARSH		CERTIFIC	ATE OF IN	SURANCE		CATE NUMBER 0333515-11
PRODUCER  Marsh USA Inc. 800 Market Street, Suite 2600 St. Louis, MO 63101-2500		NO RIGHTS UP POLICY. THIS	ON THE CERTIFICATE	MATTER OF INFORMATION ON HOLDER OTHER THAN THOSE OT AMEND, EXTEND OR ALTEIBED HEREIN.	PROVIDED	IN THE
Attn: stlouis.certrequest@mars	sh.com 212-948-0811		COMPANI	ES AFFORDING COVERA	\GE	
01950-state-GL8-06-07	Υ	COMPANY A A	CE AMERICAN IN	SURANCE COMPANY		
INSURED  Canyon Fuel Company, LLC		COMPANY B				
c/o Árch Western Bituminous ( 225 N. 5th Street, Suite 900	Group, L.L.C.	COMPANY		* *************************************		
Grand Junction, ĆO 81501		C COMPANY D				
THIS IS TO CERTIFY THAT POLICIES OF NOTWITHSTANDING ANY REQUIREMENT, TO PERTAIN, THE INSURANCE AFFORDED BY LIMITS SHOWN MAY HAVE BEEN REDUCED	TERM OR CONDITION OF ANY CONTRACT ( THE POLICIES DESCRIBED HEREIN IS SU	es any previously iss E BEEN ISSUED TO TH OR OTHER DOCUMENT	HE INSURED NAMED WITH RESPECT TO W	HEREIN FOR THE POLICY PE HICH THE CERTIFICATE MAY B	ERIOD IND E ISSUED	OR MAY
CO TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIR	AITS	
A GENERAL LIABILITY		07/31/06	07/31/07	GENERAL AGGREGATE	\$	* 500,000
	"""*\$500,000 general aggregate			PRODUCTS - COMP/OP AGG	\$	500,000
	"""per location"""			PERSONAL & ADV INJURY	\$	300,000
OWNER'S & CONTRACTOR'S PROT	por resulting			EACH OCCURRENCE	\$	300,000
X Includes XCU				FIRE DAMAGE (Any one fire)	\$	50,000
undines Ave				MED EXP (Any one person)	\$	5,000
AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	\$	
ANY AUTO ALL OWNED AUTOS				BODILY INJURY (Per person)	\$	
SCHEDULED AUTOS HIRED AUTOS				BODILY INJURY (Per accident)	\$	
NON-OWNED AUTOS				PROPERTY DAMAGE	\$	
GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$	
ANY AUTO				OTHER THAN AUTO ONLY:		
				EACH ACCIDENT	\$	
				AGGREGATE	\$	
EXCESS LIABILITY				EACH OCCURRENCE	\$	
UMBRELLA FORM				AGGREGATE	\$	
OTHER THAN UMBRELLA FORM				I WO STATE   LOTH	\$	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU- TORY LIMITS OTH- EL EACH ACCIDENT	\$	
THE PROPRIETOR/ INCL				EL DISEASE-POLICY LIMIT	\$	
PARTNERS/EXECUTIVE OFFICERS ARE: EXCL				EL DISEASE-EACH EMPLOYEE	\$	
OTHER						
DESCRIPTION OF OPERATIONS/LOCATIONS/VEH	JOI ES/SDECIAL ITEMS		1	1		
Permit Skyline Mine C007005 Blasting and use of explosives is not ex						
CERTIFICATE HOLDER	20.18 7 10.2 10.5 10.0	CANCELLA	TION			
		i		HEREIN BE CANCELLED BEFORE THI		
I Hob Dook Of bloken I Dogover	200			L E <b>NBERVSRYK</b> MAIL <u>45</u> DA		
Utah Dept. Of Natural Resourd Division of Oil, Gas and Mining			CERTIFICATE HOLDER NAMED HEREIN, BODDOMICKINES/DS/NAMIXES/SEXXIVAN/NASSEX/NS/DG/NG/NDX/DG/NG/NDX/DG/NG/NDX/DG/NG/NDX/DG/NG/NDX/DG/NG/NDX/DG/NG/NDX/DG/NG/NDX/DG/NG/NDX/DG/NG/NDX/DG/NG/NDX/DG/NG/NDX/DG/NG/NDX/DG/NG/NDX/DG/NG/NDX/DG/NG/NDX/DG/NG/NG/NG/NG/NG/NG/NG/NG/NG/NG/NG/NG/NG			
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Suite 1210 Salt Lake City, UT 84114-580	)1		ISSUECCOCCOCCCCCCCCCCCCCCCCCCCCCCCCCCCCCC			
222 2, 2		i	BY: Alfred A. Peterfeso			
		BY: Allied A.		VALIDAS OF		200000000000000000000000000000000000000

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	MARSH	10 (10 m)	OBRINIBLE	ATE OF AN	SURANCE	CERTIFICATE NUMBER CHI-000333520-11	
PRO	DUCER  Marsh USA Inc. 800 Market Street, Suite 2600 St. Louis, MO 63101-2500		NO RIGHTS UP POLICY, THIS	ON THE CERTIFICATE	MATTER OF INFORMATION ON E HOLDER OTHER THAN THOSE ROT AMEND, EXTEND OR ALTE RIBED HEREIN.	ILY AND CONFERS PROVIDED IN THE	
	Attn: stlouis.certrequest@ma	rsh.com 212-948-0811		COMPANI	ES AFFORDING COVERA	AGE	
0019	50-state-GL8-06-07	Y	COMPANY <b>A</b> A	CE AMERICAN IN	ISURANCE COMPANY		
INSL	RED		COMPANY				
	Canyon Fuel Company, LLC		В				
	c/o Árch Western Bituminous 225 N. 5th Street, Suite 900 Grand Junction, CO 81501	Group, L.L.C.	COMPANY				
			COMPANY				
			D				
52	THIS IS TO CERTIFY THAT POLICIES OF NOTWITHSTANDING ANY REQUIREMENT,	CONTINUE SUPERSED AND TEPLACE F INSURANCE DESCRIBED HEREIN HAVE TERM OR CONDITION OF ANY CONTRACT ( Y THE POLICIES DESCRIBED HEREIN IS SU DESCRIBED LEAIMS.	E BEEN ISSUED TO TI OR OTHER DOCUMENT	HE INSURED NAMED WITH RESPECT TO W	HEREIN FOR THE POLICY PI HICH THE CERTIFICATE MAY B	ERIOD INDICATED. E ISSUED OR MAY	
CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LI	MITS	
A	GENERAL LIABILITY	•	07/31/06	07/31/07	GENERAL ACCRECATE	\$ * 500,000	
	X COMMERCIAL GENERAL LIABILITY	"""*\$500,000 general aggregate			GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	\$ 500,000	
	CLAIMS MADE X OCCUR	"""per location"""			PERSONAL & ADV INJURY	\$ 300,000	
	OWNER'S & CONTRACTOR'S PROT	,			EACH OCCURRENCE	\$ 300,000	
	X Includes XCU				FIRE DAMAGE (Any one fire)	\$ 50,000	
					MED EXP (Any one person)	\$ 5,000	
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	\$	
	ANY AUTO ALL OWNED AUTOS				BODILY INJURY (Per person)	\$	
	SCHEDULED AUTOS						
	HIRED AUTOS NON-OWNED AUTOS				BODILY INJURY (Per accident)	\$	
					PROPERTY DAMAGE	\$	
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$	
	ANY AUTO				OTHER THAN AUTO ONLY:		
					EACH ACCIDENT	\$	
					AGGREGATE	\$	
	EXCESS LIABILITY				EACH OCCURRENCE	\$	
	UMBRELLA FORM				AGGREGATE	\$	
	OTHER THAN UMBRELLA FORM					\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU- OTH- TORY LIMITS ER		
		,			EL EACH ACCIDENT	\$	
	THE PROPRIETOR/ PARTNERS/EXECUTIVE				EL DISEASE-POLICY LIMIT	\$	
	OFFICERS ARE: EXCL				EL DISEASE-EACH EMPLOYEE	\$	
	OTHER						
	RIPTION OF OPERATIONS/LOCATIONS/VE	HICLES/SPECIAL ITEMS					
	mit Soldier Canyon Mine C007018 sting and use of explosives is not e	voluded under the policy					
Did	saing and use of explosives is not e.	Addition the policy.					
pe	RTIFICATE HOLDER		CANGELLA	TION			
V 5							
					HEREIN BE CANCELLED BEFORE THE		
	Litah Dant Of Natural Passur	rae	1		L ENBERVER XX MAIL45 DA		
	Utah Dept. Of Natural Resour Division of Oil, Gas and Minin	0g	1	CERTIFICATE HOLDER NAMED HEREIN, BUPPHALXIKE/185/165/165/165/165/165/165/165/165/165/16			
	1594 W. North Temple			FXRICOXARCONALCHOROPORADAR WARCHSTAYARORDINGTRRINGCOCCURRACE CONTRACTOR CONTR			
	Suite 1210 Salt Lake City, UT 84114-580	01	MARSH USA INC.	INSURGENIE OF THE CONTROL OF THE CON			
			BY: Alfred A.	Peterfeso A	William Orte	CALACT	
				Cicinoso 🔾	<b>کلت<sup>©</sup> . ۵ هدیال</b> ل :VALID AS OF	#07/27/06	
	1982 S. 1982 S. 1982	Name of the Paris	MM1(3/02)		VALID AS OF:	U11211U0	

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	MARSH		OERTIFIC	ATE OF IN	SURANCE	CERTIFICATE NUMBER CHI-000333513-11	
PRO	DUCER Marsh USA Inc. 800 Market Street, Suite 260 St. Louis, MO 63101-2500		NO RIGHTS UP POLICY, THIS	ON THE CERTIFICATE	MATTER OF INFORMATION ON HOLDER OTHER THAN THOSE IOT AMEND, EXTEND OR ALTE IBED HEREIN.	LY AND CONFERS PROVIDED IN THE	
	Attn: stlouis.certrequest@ma	rsh.com 212-948-0811		COMPANI	ES AFFORDING COVER	AGE	
0019	950-state-GL8-06-07	Υ	COMPANY A A	CE AMERICAN IN	SURANCE COMPANY		
INSU	RED		COMPANY				
	Canyon Fuel Company, LLC c/o Arch Western Bituminous	Group, L.L.C.	В				
	225 N. 5th Street, Suite 900 Grand Junction, CO 81501		COMPANY				
			COMPANY				
CO	VERAGES This	certificate supersedes and replaces	any oraviously iss	ued certificate for	the policy period noted be	alow 9	
	THIS IS TO CERTIFY THAT POLICIES OF NOTWITHSTANDING ANY REQUIREMENT,	F INSURANCE DESCRIBED HEREIN HAVE TERM OR CONDITION OF ANY CONTRACT O Y THE POLICIES DESCRIBED HEREIN IS SUE	BEEN ISSUED TO THE R OTHER DOCUMENT	HE INSURED NAMED WITH RESPECT TO W	HEREIN FOR THE POLICY PI HICH THE CERTIFICATE MAY B	ERIOD INDICATED. E ISSUED OR MAY	
CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LII	MITS	
Α	GENERAL LIABILITY	(	07/31/06	07/31/07	GENERAL AGGREGATE	\$ * 500,000	
	X COMMERCIAL GENERAL LIABILITY	"""*\$500,000 general aggregate			PRODUCTS - COMP/OP AGG	\$ 500,000	
	CLAIMS MADE X OCCUR	"""per location"""			PERSONAL & ADV INJURY	\$ 300,000	
	OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE	\$ 300,000	
	X Includes XCU				FIRE DAMAGE (Any one fire)	\$ 50,000	
					MED EXP (Any one person)	\$ 5,000	
	AUTOMOBILE LIABILITY  ANY AUTO				COMBINED SINGLE LIMIT	\$	
	ALL OWNED AUTOS				BODILY INJURY (Per person)	\$	
	SCHEDULED AUTOS HIRED AUTOS				BODILY INJURY	\$	
	NON-OWNED AUTOS				(Per accident)		
	GARAGE LIABILITY				PROPERTY DAMAGE	\$	
	ANY AUTO				AUTO ONLY - EA ACCIDENT OTHER THAN AUTO ONLY:	\$	
					EACH ACCIDENT	\$	
					AGGREGATE	\$	
	EXCESS LIABILITY				EACH OCCURRENCE	\$	
	UMBRELLA FORM				AGGREGATE	\$	
	OTHER THAN UMBRELLA FORM					\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU- OTH- TORY LIMITS ER		
	EMPLOTERS LINDILITY				EL EACH ACCIDENT	\$	
	THE PROPRIETOR/				EL DISEASE-POLICY LIMIT	\$	
	PARTNERS/EXECUTIVE EXCL				EL DISEASE-EACH EMPLOYEE	\$	
	OTHER						
Pen	cription of operations/Locations/vemit Dug Out Canyon Mine C007039	9					
bias	sting and use of explosives is not e	xcluded under the policy.					
CE	RTIFICATE HOLDER	A A CONTRACTOR OF THE SECOND	CANCELLA				
			i		EREIN BE CANCELLED BEFORE THE		
	Utah Dept. Of Natural Resour	ces	Į.		_ <b>ENBERVERY</b> MAIL <b>4.5</b> _ DA		
	Division of Oil, Gas and Minin		1		KATAKIR ARANING RASAKAN HARAN KANAN KANAN KATAKIR ARANING RASAKAN HARAN KANAN KANAN		
	1594 W. North Temple Suite 1210						
	Salt Lake City, UT 84114-580	01	MARSH USA INC.				
			BY: Alfred A. F MM1(3/02)	-eraneso 🗘	VALID AS OF:	07/27/06	
1	PART TRANSPORT	A SECTION OF THE PARTY OF					

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MARSI	4		CERTIFIC	ATE OF IN	SURANCE	CERTIFICATE NUMBER CHI-000333518-11	
ODUCER  Marsh USA Inc. 800 Market Street, St St. Louis, MO 63101	-2500	212-948-0811	NO RIGHTS UP POLICY. THIS	ON THE CERTIFICATE CERTIFICATE DOES N THE POLICIES DESCR		PROVIDED IN THE R THE COVERAGE	
Attn: stlouis.certreque	est@marsn.com	212-948-0811		COMPANI	ES AFFORDING COVERA	\GE	
950-state-GL8-06-07		Y	COMPANY A A	CE AMERICAN IN	SURANCE COMPANY		
SURED			COMPANY				
Canyon Fuel Compar c/o Arch Western Bitt	uminous Group,	L.L.C.	COMPANY				
225 N. 5th Street, Su Grand Junction, CO			C				
			COMPANY D				
OVERAGES	This certifica	ate supersedes and replace	es any praviously iss	ued certificate for	the policy period noted be	low 10	
NOTWITHSTANDING ANY REQUI	LICIES OF INSURA REMENT, TERM OR ORDED BY THE PO	NOCE DESCRIBED HEREIN HAVI CONDITION OF ANY CONTRACT LICIES DESCRIBED HEREIN IS SU	E BEEN ISSUED TO TI OR OTHER DOCUMENT	HE INSURED NAMED WITH RESPECT TO W	HEREIN FOR THE POLICY PE HICH THE CERTIFICATE MAY B	ERIOD INDICATED. E ISSUED OR MAY	
TYPE OF INSURANCE		POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIR	AITS	
GENERAL LIABILITY	4		07/31/06	07/31/07	GENERAL AGGREGATE	\$ * 500,000	
X COMMERCIAL GENERAL L	LABILITY """*\$50	0,000 general aggregate			PRODUCTS - COMP/OP AGG	\$ 500,000	
CLAIMS MADE X		ocation"""			PERSONAL & ADV INJURY	\$ 300,000	
OWNER'S & CONTRACTOR					EACH OCCURRENCE	\$ 300,000	
X Includes XCU					FIRE DAMAGE (Any one fire)	\$ 50,000	
					MED EXP (Any one person)	\$ 5,000	
AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT	\$	
ANY AUTO ALL OWNED AUTOS					BODILY INJURY (Per person)	\$	
SCHEDULED AUTOS							
HIRED AUTOS NON-OWNED AUTOS					BODILY INJURY (Per accident)	\$	
					PROPERTY DAMAGE	\$	
GARAGE LIABILITY					AUTO ONLY - EA ACCIDENT	\$	
ANY AUTO					OTHER THAN AUTO ONLY:		
					EACH ACCIDENT	\$	
EXCESS LIABILITY					AGGREGATE	\$	
EXCESS CIABILITY					EACH OCCURRENCE	\$	
UMBRELLA FORM					AGGREGATE	\$	
OTHER THAN UMBRELLA I WORKERS COMPENSATION AN					WC STATU- OTH-	\$	
EMPLOYERS' LIABILITY					WC STATU- OTH- TORY LIMITS ER EL EACH ACCIDENT	\$	
THE PROPRIETOR/ PARTNERS/EXECUTIVE	INCL				EL DISEASE-POLICY LIMIT	\$	
OFFICERS ARE:	EXCL				EL DISEASE-EACH EMPLOYEE	\$	
OTHER							
scription of operations/Local ermit Banning Loadout C007	034						
asting and use of explosives	is not excluded	under the policy.					
ERTIFICATE HOLDER		Superior 1.57	CANCELLA	TION	Company 2	17.00	
			SHOULD ANY OF TH	E POLICIES DESCRIBED I	HEREIN BE CANCELLED BEFORE TH	E EXPIRATION DATE THEREOF,	
_			THE INSURER AFF	ORDING COVERAGE WIL	l e <b>ndervorva</b> mail <u>45</u> da	YS WRITTEN NOTICE TO THE	
Utah Dept. Of Natural Division of Oil, Gas at		CERTIFICATE HOLD	CERTIFICATE HOLDER NAMED HEREIN, BYDDONIXXIEX DONING VOOR VOOR VOOR VOOR VOOR VOOR VOOR VOO				
1594 W. North Temple Suite 1210 Salt Lake City, UT 84114-5801				REPRESENTATION OF SERVING CHART CONTROL CONTRO			
Jan Lake Oily, UT 04	÷, 1 <del>4</del> -3001		MARSH USA INC. BY: Alfred A.	Datasia A	mas o super		

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	MARSH		CERTIFIC.	ATE OF IN	SURANCE	CERTIFICATE NUMBER CHI-000333511-11		
PROI	Marsh USA Inc. 800 Market Street, Suite 2600 St. Louis, MO 63101-2500 Attn: stlouis.certrequest@ma		NO RIGHTS UP POLICY, THIS	ON THE CERTIFICATE CERTIFICATE DOES N THE POLICIES DESCR		ILY AND CONFERS PROVIDED IN THE R THE COVERAGE		
	Attii. Silouis.certiequest@ma	1511.COIII 212-940-0011		COMPANII	ES AFFORDING COVERA	AGE		
019	50-state-GL8-06-07	Υ	COMPANY A A	CE AMERICAN IN	SURANCE COMPANY			
INSU	RED Canyon Fuel Company, LLC		COMPANY B					
	c/o Arch Western Bituminous 225 N. 5th Street, Suite 900	Group, L.L.C.	COMPANY					
	Grand Junction, CO 81501		COMPANY	· · · · · · · · · · · · · · · · · · ·				
			D					
	THIS IS TO CERTIFY THAT POLICIES OF NOTWITHSTANDING ANY REQUIREMENT,	certificate supersedes and replace F INSURANCE DESCRIBED HEREIN HAVE TERM OR CONDITION OF ANY CONTRACT Y THE POLICIES DESCRIBED HEREIN IS SU D BY PAID CLAIMS.	E BEEN ISSUED TO TH OR OTHER DOCUMENT	HE INSURED NAMED WITH RESPECT TO W	HEREIN FOR THE POLICY PE HICH THE CERTIFICATE MAY B	ERIOD INDICATED. E ISSUED OR MAY		
CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LII	MITS		
A	GENERAL LIABILITY		07/31/06	07/31/07	GENERAL AGGREGATE	\$ * 500,000		
А	X COMMERCIAL GENERAL LIABILITY	"""*\$500,000 general aggregate			PRODUCTS - COMP/OP AGG	\$ 500,000		
	CLAIMS MADE X OCCUR	"""per location"""			PERSONAL & ADV INJURY	\$ 300,000		
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	A dicioues ACO				MED EXP (Any one person)	\$ 5,000		
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	\$		
	ANY AUTO  ALL OWNED AUTOS  SCHEDULED AUTOS				BODILY INJURY (Per person)	\$		
	HIRED AUTOS  NON-OWNED AUTOS				BODILY INJURY (Per accident)	\$		
					PROPERTY DAMAGE	\$		
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$		
	ANY AUTO				OTHER THAN AUTO ONLY:	100		
					EACH ACCIDENT	\$		
					AGGREGATE	\$		
	EXCESS LIABILITY				EACH OCCURRENCE	\$		
	UMBRELLA FORM				AGGREGATE	\$		
	OTHER THAN UMBRELLA FORM					\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU- OTH- TORY LIMITS ER EL EACH ACCIDENT	\$		
	THE PROPRIETOR/ INCL	*			EL DISEASE-POLICY LIMIT	\$		
	PARTNERS/EXECUTIVE EXCL				EL DISEASE-EACH EMPLOYEE	\$		
	OTHER					-		
DES	CRIPTION OF OPERATIONS/LOCATIONS/VE	HICLES/SPECIAL ITEMS						
	mit SUFCO Mine C041002 sting and use of explosives is not e	excluded under the policy.						
ÇEI	RTIFICATE HOLDER	144	CANCELLA	TION	16 cm (12 cm)			
			i		HEREIN BE CANCELLED BEFORE TH			
	Utah Dent Of Natural Recou	rces			L ENGENVORVE MAIL 45 DA			
	Utah Dept. Of Natural Resour Division of Oil, Gas and Minir		1	CERTIFICATE HOLDER NAMED HEREIN, BUODANIANANANANANANANANANANANANANANANANANAN				
	1594 W. North Temple Suite 1210 Salt Lake City, UT 84114-5801			MARSH USA INC.				
	•		BY: Alfred A.	Peterfeso 🖎	www.o.pet	NAMES .		
		and the contract of			VALID AS OF	The second secon		

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	MARSH		CERTIFIC	ATE OF IN	SURANCE	CERTIFICATE NUMBER CHI-000178451-10	
PROD	UCER Marsh USA Inc. 800 Market Street, Suite 2600 St. Louis, MO 63101-2500		NO RIGHTS UP POLICY. THIS	ON THE CERTIFICATE	MATTER OF INFORMATION ON HOLDER OTHER THAN THOSE OT AMEND, EXTEND OR ALTE IBED HEREIN.	PROVIDED IN THE	
	Attn: stlouis.certrequest@ma	rsh.com 212-948-0811			ES AFFORDING COVERA	AGE	
			COMPANY				
019	50-state-GL8-06-07	Y	A A	CE AMERICAN IN	SURANCE COMPANY		
NSU			COMPANY				
	Mountain Coal Company, L.L P.O. Box 591	C.	В				
	1 Mile East of Somerset - Hw	y 133	COMPANY				
	Somerset, CO 81434		С				
			COMPANY <b>D</b>				
1   	THIS IS TO CERTIFY THAT POLICIES OF NOTWITHSTANDING ANY REQUIREMENT,	certificate supersades and replace F INSURANCE DESCRIBED HEREIN HAVE TERM OR CONDITION OF ANY CONTRACT Y THE POLICIES DESCRIBED HEREIN IS SU D BY PAID CLAIMS.	E BEEN ISSUED TO TI OR OTHER DOCUMENT	HE INSURED NAMED WITH RESPECT TO W	HEREIN FOR THE POLICY P HICH THE CERTIFICATE MAY B	ERIOD INDICATED. E ISSUED OR MAY	
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İ	X COMMERCIAL GENERAL LIABILITY	"""*\$500,000 general aggregate			PRODUCTS - COMP/OP AGG	\$ 500,000	
	CLAIMS MADE X OCCUR	"""per location"""			PERSONAL & ADV INJURY	\$ 300,000	
ľ	OWNER'S & CONTRACTOR'S PROT	-			EACH OCCURRENCE	\$ 300,000	
	X Includes XCU				FIRE DAMAGE (Any one fire)	\$ 50,000	
ļ					MED EXP (Any one person)	\$ 5,000	
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	\$	
	ALL OWNED AUTOS				BODILY INJURY (Per person)	\$	
ŀ	SCHEDULED AUTOS HIRED AUTOS				BODILY INJURY		
ŀ	NON-OWNED AUTOS				(Per accident)	\$	
	INCIN-OWNED AUTOS				PROPERTY DAMAGE	\$	
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$	
	ANY AUTO				OTHER THAN AUTO ONLY:	25 July 2015	
}					EACH ACCIDENT	\$	
-	EXCESS LIABILITY		+		AGGREGATE	\$	
	<del></del>				EACH OCCURRENCE	\$	
ŀ	UMBRELLA FORM				AGGREGATE	\$	
	OTHER THAN UMBRELLA FORM WORKERS COMPENSATION AND				WC STATU- OTH TORY LIMITS ER	*	
l	EMPLOYERS' LIABILITY					\$	
	THE PROPRIETOR/				EL EACH ACCIDENT EL DISEASE-POLICY LIMIT	\$	
	PARTNERS/EXECUTIVE INCL				EL DISEASE-POLICY LIMIT EL DISEASE-EACH EMPLOYEE		
	OFFICERS ARE: EXCL				EL DISEASE-EACH EMPLOYEE	Ψ	
DESC	RIPTION OF OPERATIONS/LOCATIONS/VE	HICLES/SPECIAL ITEMS			1		
	nit ACT/007/016, Gordon Creek M ting and use of explosives is not e						
e e e	TIFICATE HOLDER		CANCELLA	TION**			
~E.(	MILITARE MOLDEN				IEREIN BE CANCELLED BEFORE TH	E EXPIRATION DATE THEREO	
			THE INSURER AFF	ORDING COVERAGE WIL	l e <b>nerkverve</b> r mail <u>45</u> da	YS WRITTEN NOTICE TO TH	
	Utah Dept. Of Natural Resour Division of Oil, Gas and Minin		CERTIFICATE HOLD	ER NAMED HEREIN, 800%	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	FISANGERFECAREA CHANAICHEAC	
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